



Dental care
Emergency room
Hospital stays
Prescriptions
Check-ups

Eyeglasses Physical therapy Family planning Speech therapy Counseling Immunizations

Call toll-free: 1-877-KIDS-NOW

(1-877-543-7669)

or visit www.ParentHelp123.org





Do you qualify For Low-cost or Free Healthcare?

| Number of People in Family (includes parents and children) | Gross monthly income (before taxes) for Free insurance | Gross monthly income (before taxes) for Low-cost insurance* |
|---|--|---|
| 1 | \$1,734 | Up to \$2,708 |
| 2 | \$2,334 | Up to \$3,643 |
| 3 | \$2,934 | Up to \$4,578 |
| 4 | \$3,534 | Up to \$5,513 |
| 5 | \$4,134 | Up to \$6,448 |
| More | Add \$600 for each additional family member | Add up to \$935 for each additional family member |

*Monthly premiums between \$15 and \$30 per child will apply. Income guidelines valid until April 2010.